



THE
URBAN DISTRICT COUNCIL
OF SHERINGHAM



A N N U A L R E P O R T
of the
M E D I C A L O F F I C E R O F H E A L T H
to which is appended
THE REPORT OF THE
P U B L I C H E A L T H I N S P E C T O R

1 9 6 1

THE
URBAN DISTRICT COUNCIL
OF SHERINGHAM

PUBLIC HEALTH COMMITTEE

1 9 6 1

Chairman

Mr. Councillor H. C. Bishop.

Vice-Chairman

Councillor Major E. S. Gates.

Councillor Mrs. R. P. Agutter.

Mr. Councillor A. E. Hamlin.

Councillor Miss G. C. Huntley.

Mr. Councillor D.J. Killingback.

Mr. Councillor J. H. Pegg.

Mr. Councillor B. Pigott.

Mr. Councillor S. J. Williams.

P. G. Holt. M.B., Ch.B., D.P.H.
Medical Officer of Health.

R. H. Sershall.
Cert.R.S.I. & S.I.E.B., M.A.P.H.I.,
Cert.R.S.I. Meat and Food Inspector.
Surveyor and Public Health Inspector.

THE URBAN DISTRICT COUNCIL OF SHERINGHAM

REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE
YEAR ENDED 31st. DECEMBER, 1961.

To the Chairman and Members of
The Urban District Council of Sheringham.

I have the honour to submit my Annual Report on the health of the district for 1961. There has been a singular absence of serious infectious disease, the only one being notified was measles. This low incidence is very satisfactory, and it is clear that other diseases are becoming more important. Coronary thrombosis is one such condition, and together with the other modern scourge of lung cancer, is killing or incapacitating far too many men in their prime. I mention "men" purposely as it is far less common in females. It is of great concern to Public Health workers as it is partly a preventable disease, but unfortunately there is no easy inoculation or vaccination against it as with so many of the serious infectious illnesses. On the contrary it involves education of the public in a healthier way of life, and in particular it requires a reduction in mental stresses and a more placid outlook on life. This can be extraordinarily difficult in this worrying modern world, but what is much easier is to take sufficient exercise to maintain the coronary arteries in a healthy condition. Here the great enemy is the motor car, especially when associated with the increasing tendency to drive a few hundred yards to save ones legs. These people are not only occluding the streets of our towns but also their own coronary arteries! Years ago people making a journey had to take a brisk walk to and from the railway station, then to sit relaxed in their carriage while being transported to their destination. Now it is door-to-door in a sitting posture and under mental stress into the bargain. Is it any wonder that this disease is more prevalent!

A new hazard which rose in 1961 was that of contamination of grass and hence of milk supplies by fall-out from atmospheric nuclear explosions. This was taken seriously in the Autumn when immense blasts were detected from the Soviet Union, and emergency measures were undertaken to provide alternative safe supplies should the fresh milk become contaminated. However, the danger level was not reached and the special arrangements were not put into effect.

I would like to express my thanks to the Public Health Committee for their support, to the Officials of the Council for their co-operation, and to the staff of the Local Health Office for their invaluable help in the compilation of this Report.

Topography.

The Urban District of Sheringham is situated on the North Coast of Norfolk, in a region of wide open heaths, bounded to the North of the Town by the North Sea and to the South by a low range of wooded hills. It adjoins the Erpingham Rural District on three sides and has on its outskirts such picturesque places as the Roman Camp, Pretty Corner and the village of Upper Sheringham.

During the Summer months the resident population is greatly increased by an influx of visitors resorting to Sheringham for the bracing air, fine sands, golf links and scenery. It is one of the driest places in the British Isles as the air is extremely dry and bracing and consequently is highly recommended as a health resort.

The fishing industry in Sheringham still flourishes and is particularly well known for the excellence of its crabs and lobsters, although this industry is now largely superseded by the town's rapid development as a holiday centre and the increasing class who resort to Sheringham for its natural beauties and facilities.

General Statistics.

Area in acres.....	929.
Population (Estimated).....	4,640.
Number of inhabited houses.....	1,783.
Total Rateable Value.....	£73,682.
Product of a Penny Rate.....	£296. 16. 2.

VITAL STATISTICS

BIRTHS

		<u>M</u>	<u>F</u>	<u>Total</u>
<u>Live Births</u>	Legitimate	42	28	70
	Illegitimate	<u>2</u>	<u>1</u>	<u>3</u>
		<u>44</u>	<u>29</u>	<u>73</u>

Live birth rate per 1,000 of the estimated population	15.7
Corrected rate (comparability factor 1.27)	19.9
National rate	17.4

There were five fewer births than last Year and the rate is a little lower accordingly. The National birth rate is the highest since 1948. Illegitimate births represent 4.12 of the total.

Still Births. There were two male and one female still births during the Year. This represents a rate of 39.5 per 1,000 total births, whereas last Year there was only one case, with a rate of 12.6. The National figure is 18.7, the lowest ever recorded.

Infant Mortality. There were no deaths of any infants under the age of one Year. This is most satisfactory as by National standards one or two would be expected on average.

Mortality for England and Wales 21.4

Once again, this is the lowest figure ever recorded.

DEATHS.

The Registrar-General has recorded the following deaths and as usual they are classified under 36 headings, based on the abbreviated list of the International Statistical Classification of Diseases, Injuries and Causes of Death, 1955:-

					<u>M</u>	<u>F</u>	<u>Total</u>
Tuberculosis, respiratory	...	...	...	...	-	-	-
Tuberculosis, other	...	...	...	...	-	-	-
Syphilitic Disease	...	...	...	...	-	-	-
Diphtheria	...	...	...	...	-	-	-
Whooping Cough	...	...	...	...	-	-	-
Meningococcal Infections	...	...	...	...	-	-	-
Acute Poliomyelitis	...	...	...	...	-	-	-
Measles	...	...	...	...	-	-	-
Other infective and parasitic diseases	...	...	...	...	-	-	-
Malignant neoplasm, stomach	...	...	...	...	-	-	-
Malignant neoplasm, lung, bronchus	...	...	...	...	4	-	4
Malignant neoplasm, breast	...	...	...	...	-	1	1
Malignant neoplasm, uterus	...	...	...	...	-	1	1
Other malignant and lymphatic neoplasms	...	...	...	...	5	4	9
Leukæmia, aleukæmia	...	...	...	...	-	-	-
Diabetes	...	...	...	...	-	-	-
Vascular lesions of nervous system	...	...	...	...	8	4	12
Coronary disease, angina	...	...	...	...	12	4	16
Hypertension with heart disease	...	...	...	...	1	-	1
Other heart disease	...	...	...	...	9	21	30
Other circulatory disease	...	...	...	...	2	-	2
Influenza	...	...	...	...	-	-	-
Pneumonia	...	...	...	...	1	-	1
Bronchitis	...	...	...	...	2	-	2
Other diseases of respiratory system	...	...	...	...	2	-	2
Ulcer of stomach and duodenum	...	...	...	...	1	1	2
Gastritis, enteritis and diarrhoea	...	...	...	...	-	-	-
Nephritis and nephrosis	...	...	...	...	-	-	-
Hyperplasia of prostate	...	...	...	...	-	-	-
Pregnancy, childbirth, abortion	...	...	...	...	-	-	-
Congenital malformations	...	...	...	...	-	-	-
Other defined and ill-defined diseases	...	...	...	...	-	1	1
Motor vehicle accidents	...	...	...	...	-	-	-
All other accidents	...	...	...	...	2	3	5
Suicide	...	...	...	...	-	1	1
Homicide and operations of war	...	...	...	...	-	-	-
					<u>49</u>	<u>41</u>	<u>90</u>

VITAL STATISTICS (Continued)

Causes of Death (Continued).

The total number of deaths is higher than for 1960 (72), and as usual heart disease heads the list, being responsible for over half of all deaths. There were 16 deaths attributable to coronary disease and angina, which is more than all those caused by cancer (15). Once again there were no deaths from any infectious disease or maternal causes. It is good to note that there was no wastage of life by road accidents in 1961 (two the previous Year), but unfortunately five deaths were attributed to other types of accident, which is a considerable number in a small town.

Death Rate per 1,000 of the estimated population for the last five Years:-

<u>1957</u>	<u>1958</u>	<u>1959</u>	<u>1960</u>	<u>1961</u>
13.2	18.3	14.0	15.9	19.4
Corrected Rate (Comparability factor 0.65)				12.6
National Rate				12.0

INFECTIOUS DISEASE

The following notifications of infectious disease have been received during the Year:-

Disease	Under 1	1-2	3-4	5-9	10-14	15-24	25+	Total
Measles	-	8	10	22	-	1	-	41
Total	-	8	10	22	-	1	-	41

Measles tends to be prevalent in alternate Years and 1961 was a particularly bad Year for this disease.

Tuberculosis

No new cases of Tuberculosis were notified, which is most gratifying. There were two inward transfers, i.e. persons who have Tuberculosis who have come to live in the district, and the total number of persons on the Tuberculosis register at the end of the Year stood at 37.

	Pulmonary		Non-Pulmonary		Total
	Males	Females	Males	Females	
New cases	-	-	-	-	-
Inward transfers	1	-	-	1	2
Removed from register	2	1	-	1	4
No. of cases on register at 31.12. 1961.	14	19	-	4	37

Skin tests are performed on all children attaining the age of 13 Years to ascertain their susceptibility to Tuberculosis, and vaccination against the disease is offered to all who are deemed to be at risk. The table below shows the results in Area 2:-

B. C. G. Vaccination - 1961

No. skin tested	298
No. found positive	44
No. found negative and vaccinated	240

INFECTIOUS DISEASE (Continued)

Tuberculosis (Continued).

Tuberculosis is often considered to be a thing of the past, but this is not true. Mass radiography still reveals a number of persons with unsuspected active disease, and a recent report suggests that there may be 50,000 or more cases of unrecognised Tuberculosis among persons over 15 Years in this Country; furthermore an average of 17% of children have acquired tuberculosis infection by the age of 13.

Smallpox Vaccination

The following table relates to persons vaccinated in Area No. 2 during 1961:-

Age at date of vaccination	Under 1	1	2	3	4	5-14	15 & Over	Total
Primary	218	30	6	3	2	9	28	296
Re-vaccination	-	-	1	3	2	25	120	151

1961 saw the beginning of a serious and prolonged outbreak of smallpox, caused by importation of the disease in an immigrant from Pakistan. These outbreaks occur every few Years, and it is only by means of thorough and painstaking work on the part of local authorities' Health Departments that they are brought under control. Hence the need for vaccination in this Country, and this should be done in infancy. Older children and adults, if vaccinated for the first time, may have unpleasant and, occasionally, serious reaction. It is recommended, therefore, that adults should not undergo primary vaccination unless at risk, but that every encouragement should be given to the protection of individuals while in infancy. Re-vaccination at a later date is then a safe and innocuous procedure.

Poliomyelitis

Poliomyelitis Vaccination - 1961

Age	Under 1	1	2	3	4	5	6	7	8	9	10	11	12	13
Received two injections	47	217	52	15	13	17	21	17	22	30	22	13	13	10
Received third injections	-	102	160	19	4	11	11	6	7	4	8	3	13	4

14	15-25	26-40	Others	Total
18	348	549	30	1,454
8	134	337	32	863

The total number of persons in Area No. 2 who had received three injections at any time up to 31st. December, 1961, was as follows:-

Children age 5 Years and under	-	1,149
Children age between 6 and 15 Years	-	2,754
Persons age between 16 and 40 Years	-	2,330
Others	-	91
		<u>6,324</u>

Poliomyelitis (Continued)

In April, 1961, the Ministry of Health announced that a re-inforcing fourth dose should be offered to children when they enter school (normally at the age of five) and also to children of five and over who have not reached the age of twelve whether or not they are attending school. In all cases the fourth dose should be given not earlier than one Year after the third dose but as soon thereafter as possible. A total of 1,949 children in the eligible age group were given a reinforcing fourth injection but this particular scheme was suspended in October 1961 owing to restricted supplies of Salk vaccine.

The foregoing figures relate to the Administrative Area No. 2 of the Norfolk County Council, as separate figures for Sheringham are not available.

It was also announced that a new oral vaccine was in production and would be made available in the near future.

Diphtheria, Whooping Cough and Tetanus

Immunisation against diphtheria is now usually combined with that against Whooping Cough and Tetanus so as to reduce the total number of injections required. These injections are best given early in infancy so as to protect against Whooping Cough, which is so dangerous when contracted by a baby. It does not necessarily prevent a child from developing the disease altogether, but it does considerably reduce the severity of the illness, so much so that in many cases Whooping Cough is never suspected or diagnosed.

I am pleased to report a big increase in the number immunized, from 252 in 1959 to 456 in 1960 and now to 632 in 1961. In addition nearly 1,000 children received a booster injection against diphtheria (383 last Year). These highly satisfactory figures are mainly the result of the campaign, which was begun in 1960, to bring up to date the immunized state of the school children in the district and to combine this with immunization against tetanus where required. The work had fallen behind because of the major offensive against poliomyelitis which had taken up so much time two or three years ago. Now the leeway has been made up and the figures will decline again in future years.

1961
Diphtheria Immunization
Area No.2.

Age at 31.12.61. i.e. born in Year	- 1 1961	1 1960	2 1959	3 1958	4 1957	5 1956	6 1955	7 1954	8 1953	9 1952	10 1951	11 1950	12 1949	13 1948	14 1947	Total under 15 Years
Total immunised during 1961	113	172	25	12	8	11	48	44	42	63	38	35	17	1	3	632
Ditto - Booster	-	1	15	20	4	47	135	130	138	155	149	113	62	8	8	986

Primary Booster

The various antigens used were as follows:-

Triple Antigen (Diphtheria/Pertussis/Tetanus)	=	344	71
Combined Antigen (Diphtheria/Tetanus)	=	263	50
Combined Antigen (Diphtheria/Pertussis)	=	1	-
Single Antigen (Diphtheria only)	=	<u>24</u>	<u>865</u>
		<u>632</u>	<u>986</u>

TETANUS IMMUNIZATION - A total of 870 children under 15 Years of age and 221 persons over the age of 15 Years were inoculated during the Year with tetanus toxoid and a further 66 received a booster injection. Thus, by including those inoculated with triple or combined antigen, a grant total of 1,885 persons of all ages received protection against tetanus during 1961 in Area No. 2.

GENERAL PROVISIONS OF THE HEALTH SERVICE

For the purpose of carrying out the service provided by the Norfolk County Council under the National Health Service Act of 1946, the Cromer Urban District, the Sheringham Urban District and the Erpingham Rural District are combined to form County Area No. 2. These services include midwifery, the care of mothers and young children, vaccination and immunisation, home nursing, mental health, prevention of illness, care and after care, home helps and the ambulance service.

Maternity and Child Welfare.

The town is served by an infant welfare clinic held twice a month at the St. Peter's Parish Hall, Waterbank Road. The domiciliary service is provided by a District Nurse/Midwife and a full time Health Visitor, both of whom are in attendance at the clinic, together with the Medical Officer.

All children under five are visited regularly in their homes by the Health Visitor, who takes over from the Midwife when the baby is two weeks old. Children of five years and over come under the supervision of the school nurse.

Vaccination and Immunisation.

This is carried out by the Assistant County Medical Officer and by the General Practitioners. Sessions for vaccination and immunisation against smallpox, diphtheria, whooping cough, tetanus, tuberculosis and Poliomyelitis are arranged at clinics, schools and General Practitioners' surgeries.

School Medical Service.

This takes up a considerable amount of time as every one of the 28 schools in the area is visited annually and on those occasions a full examination of all children in the appropriate age group is carried out. They are seen during their first Year at school, at 10 Years and before leaving; if any defects are discovered, they are referred for treatment or investigation. Children in whom there is thought to be a need for supervision are seen every Year. Apart from the routine visits, many special visits to schools are made for such purposes as immunisation, mental ascertainment, examination when transport to school is believed necessary, and so on. The vision of all pupils is tested at eight years as a routine.

General Welfare.

These services are administered in the district by the Local Welfare Officer, who is in attendance and available for interview at:-

Sheringham U. D. C. Offices 2. - 2. 30 p.m. Tuesday.

Your obedient Servant,

P.G. HOLT.

M.B., Ch.B., D.P.H.

June, 1962.

SANITARY CIRCUMSTANCES OF THE AREA

(The Report of the Surveyor and Public Health Inspector)

1. Water. - The Eastern Gas Board serve water to all the properties within the Urban District by a piped supply. The collecting ground, pumping station and reservoirs are situated in the Sheringham Woods, a situation which is isolated and enclosed approximately half-a-mile South of the Town.

The water is derived:-

- (a) From springs situated within the collecting grounds and stored in reservoirs.
 - (b) From two deep wells sunk in chalk approximately 400 feet deep. The water is pumped into a reservoir at a higher level to supply by gravitation the high-lying parts of the Town.
- (i) (a) Quality of Water. - On behalf of the Eastern Gas Board, the Counties Public Health Laboratory carried out monthly bacteriological examinations and half-yearly chemical analysis of the treated water as supplied in this Urban District during the period under review, all of which proved to be of a very high standard of purity. Certificates giving the result of these bacteriological and chemical examinations are exhibited in the Showroom of the Eastern Gas Board's premises in Sheringham, for the perusal of the general public. Chlorine residue tests are carried out daily on the Spring and Well waters, both treated and untreated.
- (b) Quantity of Water. - The quantity of water supplied in the Urban District is sufficient for all purposes during dry weather. The quantity of water obtained from the various springs naturally varies a little during the Summer and dry weather, but the level of the water in the wells varies little however much it is pumped and has never shown signs of failing.
- (ii) The water supplied within the Urban District is not liable to plumbo-solvent action, as the p.H Reaction of the water is neutral or on the alkaline side of neutrality. All the water service pipes are laid on in galvanised wrought iron.
- (iii) No action has been found necessary in respect of any form of contamination of the water supply.
- (iv) (a) Number of dwelling-houses supplied direct from public water mains 1,766.
- Number of population supplied from public water mains 4,660.
- (b) Number of dwelling-houses supplied by means of stand pipes 51.
- Number of population supplied by means of stand pipes 150.

2. Drainage and sewerage. - The Urban District is sewered throughout with a system needing improvement as it is not capable of dealing with excessive and sudden rainfall.

The Council's Consulting Engineers have submitted schemes for:-

- (a) The provision of a 24" dia. C.I. pipe Sea Outfall 367 yards long to replace the present defective and worn out Outfall pipe, and
- (b) Relieving the main sewers at points of surcharge.

/The.

The work of providing the new 24" dia. Sea Outfall sewer (Scheme(a)) was in progress at the end of the period under review and it is intended to consider scheme (b) for relieving the main sewers on the completion of scheme (a).

3. Rivers and Streams. - One stream runs through the Urban District and it has not been found necessary to take any action during the period to check pollution.
4. (a) Closet Accommodation. All houses, excepting one modern and three unfit houses, in the Urban District are connected to the sewer and have modern type water closets.
- (b) Public Cleansing. House refuse bins are emptied once weekly, using an 18 cu. yd. diesel carrier "Dual-Tip" refuse collection vehicle for this service. It is found necessary in the Summer months to make twice weekly collections of refuse from boarding houses and hotels. House refuse is disposed of by the method of controlled tipping on a site on the outskirts of the District.
- (c) Schools. The Schools are of a modern type, the water supply and sanitary conditions being quite satisfactory.
- (d) Premises and Occupations Controlled by Byelaws. There is no Common Lodging House or Offensive Trade in the Urban District.

SANITARY INSPECTION OF THE AREA.

- (a) Inspections and Visits. The following inspections and visits have been carried out during the period:-

Sanitary routine inspections and re-visits	...	...	...	297
Inspections and re-visits in connection with				
Housing Act procedure	...	...	...	17
Slaughterhouse meat inspection visits	...	...	...	108
Inspections and re-visits in connection with				
Discretionary and Standard Grants	...	...	...	33
Drainage inspections and re-visits	...	...	...	131
Food premises and food inspection visits	...	...	...	19
Factory inspections	...	...	...	9
Council houses and Council property inspections and re-visits				221
Visits in connection with caravans and tents	...	...		24
Visits in connection with refuse collection	...	...	...	23
Rats and mice destruction inspections and re-visits			...	240
Dirty premises inspections and re-visits	...	...	...	15
Miscellaneous visits	...	...	...	129
Inspections and re-visits in connection with Surveyor's				
general duties	...	...	...	455

- (b) Action taken in consequence of inspections:-

Informal Notices served	...	...	...	58
Statutory Notices served under the Public Health Acts	...	...	...	Nil.

- (c) Result of Action taken in consequence of Notices served:-

Defects remedied by Informal Notices	...	...	...	56
" " " Statutory Notices	...	...	...	Nil.
" " " Legal Proceedings	...	...	...	Nil.

(d) Proceedings under Section 16 and 17 of the Housing Act, 1957:-

Number of dwelling-houses in respect of which a Closing Order was made under Section 17 of the Housing Act, 1957 ... Nil.

Number of dwelling-houses in respect of which an Undertaking to make fit was accepted under Section 16 of the Housing Act, 1957 ... Nil.

(e) Summary of work carried out as a result of Formal and Informal Action:-

Defective drainage renewed...	4
Drainage unblocked and cleansed	9
Water closet pedestals renewed	3
Sinks renewed	1
Sink waste pipes renewed and trapped	1
Roofs repaired	5
Chimney stacks repaired or rebuilt	1
Eaves guttering and downpipes repaired or renewed	3
Windows repaired	4
Doors repaired or renewed	2
Wall and ceiling plaster repaired	8
Firegrates repaired or renewed	3
Floors repaired or renewed	4
Water closets rebuilt	1
Damp walls repaired and treated	6
Dirty premises cleansed	7

(f) Number of inspections and visits in connection with the duties of Surveyor:-

Number of Building Plans submitted for approval	79
" " " " approved	74
" " " " for houses and bungalows	18
" " " " for conversions	2
" " " " for additions and alterations	20
" " " " for bathrooms	15
" " " " for garages	10
" " " " for factory extension	1
" " " " for Fire Station	1
" " " " for water closets	2
" " " " for Library	1
" " " " for caravan sites	1
" " " " for Tractor House (R.N.L.I.)	1
" " " " Girl Guides' Headquarters	1
" " " " Warehouse	1
Visits in connection with inspection of:-	
Foundations	51
Damp proof courses	51
General building byelaw inspections	201
Number of drain tests carried out in new buildings	39
Number of new houses erected during the period:-	
By the Local Authority	4
By other persons	14
Conversion of premises - in family units	2
Number of applications for Discretionary Grants	2
" " " " " approved	Nil.
" " " " Standard Grants	8
" " " " " approved	8
" " visits in connection with Grant applications	33

(g) Shops. - No action under this heading has been found necessary.

(h) Camping Sites. - Two sites within the Urban District have been licensed under the Caravan Sites and Control of Development Act, 1960, conforming with the model standards and providing standings and all the facilities required for one hundred and thirty three caravans.

- (i) Smoke Abatement. - No action under this heading has been found necessary.
- (j) Swimming baths and Pools. - There are no swimming baths or pools open to the public in the Urban District.
- (k) Eradication of Bed Bugs. - No evidence has been found of bed bugs in this Urban District.

Inspection and Supervision of Food

- (a) Milk Supply. There are no milk producers or cowkeepers within the Urban District.
The Norfolk County Council is the Licensing Authority for designated milks.

Seventy-six samples of Pasteurised milk have been taken during the period by the Norfolk County Council Medical Officer's Department from the Sheringham premises and vehicles of East Coast Dairies Ltd., and all but two samples satisfied the prescribed tests.

Ice Cream. Twelve samples of Ice Cream were taken during the period from retailers in the Urban District and submitted to the Public Health Laboratory Service, Norwich, for bacteriological examination, resulting in eight samples being Provisional Grade I; three Provisional Grade II, and one Provisional Grade IV.
- (b) Adulteration, Chemical and Bacteriological Examination of Food. The appropriate Authority under this heading is the Norfolk County Council.
- (c) Nutrition. No special work in the dissemination of knowledge on this subject has been considered necessary.
- (d) Shellfish. No shellfish are gathered within the area of the Urban District.
- (e) Food Hygiene Regulations. Inspections of food premises in the Urban District have been made and it has been unnecessary to take any statutory or legal action in this matter.
- (f) Meat Inspection. There are eight butchers shops within the Urban District.

One Slaughterhouse is licensed in the Urban District, which is owned and used by a Sheringham butcher for the supply of meat to his retail business in the Town. After consultation with all Sheringham butchers and organisations representing the interests concerned, as required under Section 3(1) of the Slaughterhouses Act, 1958, a "Report on Slaughterhouse Facilities" was submitted to the Minister of Agriculture, Fisheries and Food, giving the necessary information in detail of this particular slaughterhouse. The Minister has accepted this Report and appointed the 1st. July, 1963, as the day from which this slaughterhouse must comply with the Construction Regulations.

Two Sheringham butchers use a Slaughterhouse situate in the adjoining Rural District for their meat supply, the remainder purchase their meat from fresh meat wholesalers.

(f) Meat Inspection - (Continued).

A statement follows of the number of animals slaughtered, inspected and condemned in whole or part at the licensed Slaughterhouse in the Urban District:-

Carcases and Offal inspected and condemned in whole or in part

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	161	-	5	187	294	-
Number inspected	161	-	5	187	294	-
<u>ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCI</u>						
Whole carcasses condemned	1	-	-	-	1	-
Carcases of which some part or organ was condemned	20	-	-	-	35	-
Percentage of the number inspected affected with disease other than Tuberculosis and Cysticerci	13.04	-	-	-	12.24	-
<u>TUBERCULOSIS ONLY</u>						
Whole carcasses condemned	-	-	-	-	-	-
Carcases of which some part or organ was condemned	-	-	-	-	14	-
Percentage of the number inspected affected with Tuberculosis	-	-	-	-	4.76	-
<u>CYSTICERCOSIS</u>						
Carcases of which some part or organ was condemned	-	-	-	-	-	-
Carcases submitted to treatment by refrigeration	-	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-	-

The total weight of carcase parts and organs condemned amounted to 671 lbs.

Attention is drawn to the absence of Tuberculosis in Cattle.

FOODSTUFFS.

49 lbs. of Tinned Meat, 105 lbs. of Sausages, 56 lbs of Frozen Kidneys and 70 lbs. of Fish were condemned as unfit for human consumption.

Factories Act, 1937 and 1948. Nine inspections have been made in connection with this heading. Two informal notices were served, requiring dirty premises to be cleansed and sink to be provided, which were complied with.

Your obedient Servant,

R. H. SERSHALL.

Cert.R.S.I. & S.I.E.B., M.A.P.H.I.
Cert.R.S.I. Meat and Food Inspector.

Surveyor and Public Health
Inspector.

